Approved for use through 9/30/00. OMB 0651-0032
Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

Attorney Docket Number Qantec-06 **DECLARATION FOR UTILITY OR** Minghao (Mary) Zhang **First Named Inventor DESIGN** PATENT APPLICATION **COMPLETE IF KNOWN** (37 CFR 1.63) **Application Number** herewith Filing Date Declaration ☐ Declaration Submitted OR Submitted after Initial Group Art Unit with Initial Filing (surcharge (37 CFR 1.16 (e)) Filing **Examiner Name** required)

	TIME FIELFELFELF	As a below named inventor, I hereby declare that:								
My residence, post office	address, and citizenship are	as stated below next to my	/ name.							
I believe I am the original, names are listed below) o	first and sole inventor (if only if the subject matter which is	y one name is listed below) claimed and for which a pa	or an original, f	irst and joint invention e	entor (if plural ntitled:					
Inductors and transformers in integrated circuits										
the specification of which (Title of the Invention) is attached hereto OR										
	was filed on (MM/DD/YYYY) as United States Application Number or PCT International									
Application Number	and w	as amended on (MM/DD/Y)	·		(if applicable).					
I hereby state that I have reamended by any amendme	eviewed and understand the ent specifically referred to abo	contents of the above ident		n, including the						
,	disclose information which is		defined in 37 CF	TD 1 56						
		material to parent	demico m c, c.	Th 1,50.						
I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.										
America, listed below and ha	ive also identified below by	on which designated at least checking the box, any foreign	st one country of	other than the U	laikad Okakaa af					
America, listed below and ha	ive also identified below by	on which designated at least checking the box, any foreign	st one country of	other than the Lor patent or inventority is claimed.	laikad Okakaa at					
America, listed below and ha or of any PCT international a	ave also identified below, by a application having a filing date	checking the box, any foreign before that of the application of the properties of the application of the app	st one country of application for its priority	other than the Lor patent or inventority is claimed. Certified Co	United States of ontor's certificate, oppy Attached?					
America, listed below and ha or of any PCT international a Prior Foreign Application Number(s) Additional foreign applica	Country Attion numbers are listed on a	checking the box, any foreige before that of the application of the ap	priority Not Claimed sheet PTO/SB/0	certified Co YES	Dnited States of ntor's certificate, Ppy Attached? NO					
America, listed below and ha or of any PCT international a Prior Foreign Application Number(s) Additional foreign applica	Country Country Attion numbers are listed on a linder 35 U.S.C. 119(e) of any	checking the box, any foreige before that of the application of the ap	priority Not Claimed sheet PTO/SB/0	certified Co YES	Dnited States of ntor's certificate, Ppy Attached? NO					

[Page 1 of 2]

Burden Hour Statement: This form is estimated to take 0.4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.



DECLARATION Utility or Design Patent Application

DLULA	HATION -	— Gunty	01 1	<u> </u>	II Fate	III Apr	moan	<i>J</i> 11	
I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.									
U.S. Parent Application or PCT Parent Number				Parent Filing Date Par			ent Patent Number (if applicable)		
10/325,038				12/20/2002					
10/137,988				5/2/2002		6,559,693			
09/947,643				9/5/2001			6,322,595		
	CT international application								
As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Paten and Trademark Office connected therewith: X Customer Number 26797									
Nam	Registration Name Number			Name			26 Reditration Number		
\						PA1	TENTI TRADEMA	ARK OFFICE	
Additional registere	d practitioner(s) named	on supplemental F	Registered	Practitioner	Information she	et PTO/SB/020	Cattached here	eto.	
Direct all correspondence to: Customer Number or Bar Code Label Customer Number OR Correspondence address below						lress below			
Name									
Address									
Address									
City				State		ZIP			
Country		Telephone	<u> </u>			Fax			
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.									
Name of Sole or I	First Inventor:			☐ A petiti	on has been	filed for this u	insigned inve	entor	
Given Name (first and middle [if any])			-	Family Name or Surname					
Minghao (Mary)			<i></i>	Zhang					
Inventor's Signature	Mugh	n 3h	y	, -			Date	7/21/0	
Residence: City	esidence: City Cupertino State CA		CA	Country USA			Citizenship US		
Post Office Address		2097	5 Valle	y Green	Drive, Sui	te 293			
Post Office Address							-		
City	Cupertino State	CA	ZIP	95014		Country	USA		
Additional invento	rs are being named	on thesup	plementa	l Additional	Inventor(s) s	sheet(s) PTO/	SB/02A attac	ched hereto	

valid OMB control number.

sign (+) inside this box

Approved for use through 9/30/98. OMB 0651-0032

Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a

DECLARATION

ADDITIONAL INVENTOR(S) Supplemental Sheet Page _1_ of _1

-										
Name of Additio	nal Joint Inventor, if ar	ıy:	I	A petition	on has been file	d for thi	s unsigned	inventor		
Given Name (first and middle [if any])				Family Name or Surname						
1	John C.				Tung					
Inventor's Signature					Date	7/21/03				
Residence: City	Cupertino	State	CA	Country	USA		Citizenship	us		
Post Office Address	Post Office Address 20975 Valley Green Drive, Suite 293									
Post Office Address										
City	Cupertino	State	CA	ZIP	95014	Country	USA			
Name of Addition	Name of Additional Joint Inventor, if any:									
Given Na	Given Name (first and middle [if any]) Family Name or Surname									
Inventor's Signature						·	Date			
Residence: City		State		Country			Citizenshi	р		
Post Office Address										
Post Office Address										
City		State		ZIP		Count	ry			
Name of Additional Joint Inventor, if any:										
Given Name (first and middle [if any]) Family Name or Surname										
Inventor's Signature					,		Date	· · · · · · · · · · · · · · · · · · ·		
Residence: City		State		Country			Citizenshi	p		
Post Office Address										
Post Office Address				- 1						
City		State		ZIP		Co	untry			

Burden Hour Statement: This form is estimated to take 0.4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.